

Nebraska Alcohol and Drug Information Clearinghouse

Office of Mental Health, Substance Abuse, and Addiction Services

Nebraska Health and Human Services System

PO Box 98925, Lincoln, NE 68509-8925

800-648-4444 | Fax: 402-479-5162 | info@prevlink.org

IC Loan Agreement Form

Please read carefully, and keep a copy for your files. All borrowers must have a copy of this signed agreement and a photocopy of a valid driver license or other photo identification on file with the Alcohol and Drug Information Clearinghouse in order to borrow any material. Once on file, material can be requested by phone or e-mail. Please contact the Alcohol and Drug Information Clearinghouse if you have any questions. Please complete this form and return it with a photocopy of your driver's license or other photo identification to the above address.

- ♦ **Print and video materials may be borrowed for a two week period.** Overdue fines are calculated at \$0.10 a day per book, and \$1.00 per day per video tape. We ask that you return material promptly, so we may provide service to as many people as possible. ***Borrowing privileges will be suspended for anyone owing overdue fines or restitution for damaged or lost materials.***
- ♦ There is no cost to borrow any of the material from the Alcohol and Drug Information Clearinghouse, including videos, but service is restricted to residents of Nebraska. The Alcohol and Drug Information Clearinghouse will ship the materials to you via US Mail or UPS.
- ♦ Previewing videos is strongly recommended. Videos may be requested Monday-Friday 8:00 a.m. - 5:00 p.m.. Materials may not be reserved more than 24 hours in advance.
- ♦ **Mailed tapes must be returned via UPS or registered US Mail.** Please return the borrowed materials in a box or an air-bubble envelope for the protection of the materials; do not use manila envelopes or paper bags.
- ♦ You are ultimately responsible, until their return to the library, for the care and safe return of any borrowed materials. **Replacement and/or repair costs for loss or damage of material will be the responsibility of the undersigned.** Please notify the Alcohol and Drug Information Clearinghouse as soon as possible in case of loss or damage. Do not try to repair the items yourself.
- ♦ **I have read the above and agree to abide by the policies listed:**

Name:

Agency:

Street Address (for UPS Delivery):

Mailing Address:

City/State/Zip:

Phone:

Fax:

E-mail:

Home Address:

City/State/Zip:

Phone:

Date:

Signature:

Would you like to be placed on the Alcohol and Drug Information Clearinghouse's mailing list? ____yes ____no